



PRIVATE INVESTIGATOR AGENCY NOTICE OF CHANGE IN NAME AND/OR ADDRESS

CURRENTLY LICENSED AS

Business Name _____
Address _____
City _____ State _____ Zip _____
UBI # _____
☐ Name Change ☐ Address Change

NEW INFORMATION *(If a company name change, see instructions below)*

Effective Date _____
Name _____
Address _____
City _____ State _____ Zip _____
Phone (____) _____ Fax (____) _____
If name change is due to change in ownership or entity (i.e., corporation, partnership or sole proprietorship), contact the Department of Licensing for a new company application.

COMPANY PRINCIPAL NAME (Please Print)

X

SIGNATURE OF COMPANY PRINCIPAL

Date _____

**UPON FILING, THIS APPLICATION BECOMES A PUBLIC RECORD AND IS
SUBJECT TO PUBLIC DISCLOSURE PROVISIONS PURSUANT TO RCW 42.17**